	`							Δr	nolication	or Do	cket Num	ber		
	PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					
Effective January 1, 2003										10006610				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			52				F	RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BA	BASIC FEE 375.00		OR	BASIC FEE	750.00		
TOTAL CHARGEABLE CLAIMS			59 minus 20=		• 154).		>	X\$ 9=		OR	X\$18=	576		
INDEPENDENT CLAIMS			5 minus 3 =		2		7	X42=		OR	X84=	168		
MU	LTIPLE DEPENI	DENT CLAIM PI	RESENT				+140=			OR	+280=	<i>E)</i>		
If the difference in column 1 is less than zero, enter "0" in column 2							T	OTAL		OR	TOTAL	1494		
CLAIMS AS AMENDED - PART II											OTHER			
3	(Column 1) (Column 2) (Column 3)						S	MALL	ENTITY	OR	SMALL			
NTA	CLAIMS REMAINING AFTER AMENDMENT			NUMBER PRE		PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
DME	Total	· 50	Minus	# 56		= /	5	<b>(\$ 9=</b>		OR	X\$18=	1		
AMENDMENT	Independent + 5 Minus +++			***	5 =			<b>K42</b> =	/	OR	X84= /			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140=	/	OR	+280=			
	(Column 1) (Column 2) (Column 3)							TOTAL		OR	TOTAL			
								OIT. FEE		Jon	ADDIT. FEE	L		
		(Column 1) CLAIMS REMAINING AFTER AMENOMENT	A. S. Dept.	HIGH NUM PREVIO PAID	HEST MBER OUSLY	PRESENT EXTRA			ADDI- TIONAL FEE	1		ADDI-		
MENDMENT B							F	RATE			RATE	TIONAL FEE		
	Total	*	Minus	**		=	,	<b>K\$</b> 9=		OR	X\$18=			
	Independent	*	Minus	***		-		X42=		OR	X84=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u>ا</u> .	140=		OR	4			
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE			
		(Column 1)		(Colu	mn 2)	(Column 3)								
NTC		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	f	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	•	Minus	**		2		X\$ 9=		OR	X\$18=			
MEN	Independent	•	Minus .	***				X42=		OR	V24			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		1		

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

TOTAL ADDIT. FEE OR ADDIT. FEE OR

FORM PTO-875 (Rev. 12/02)

\*U.S. Government Printing Office: 2003 -- 498-278/69151

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

TOTAL